Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 1 of 47

Official Forn	n 1 (4/07)				D0	Cument	1 0	gc I t	J1 4 1				
		Uni				ruptcy of Illino					Vol	untary	Petition
Name of Debrace, Coleman,	,	vidual, enter Las	st, First,	Middle):				Name of Joint Debtor (Spouse) (Last, First, Middle): Coleman, Wanda C					
		the Debtor in the trade name		years			(inclu	de marrie	es used by the d, maiden, an da C Hunte	d trade names		3 years	
Last four digit		ec./Complete EI	IN or oth	ner Tax I	D No. (if mo	ore than one, state		our digits		Complete EIN	N or other Ta	ax ID No. (if	more than one, state al
Street Address 6002 Park Loves Par	Ridge R	(No. and Street	, City, a	nd State)		ZIP Code 61111	60		of Joint Debt Ridge Roak k, IL		treet, City, a	nd State):	ZIP Code 61111
County of Res Winnebag		of the Principal l	Place of	Busines	s:			y of Resi nnebag	dence or of the	ne Principal P	lace of Busin	ness:	
Mailing Addre	ess of Debt	or (if different f	rom stre	et addres	ss):	ZIP Code	Mailir	ng Addre	ss of Joint De	btor (if differe	ent from stre	eet address):	ZIP Code
Location of Pr (if different fro		sets of Business ddress above):	Debtor										
■ Individual See Exhibi □ Corporatio □ Partnership □ Other (If do	on (includes be better is not of	ganization) ne box)	ntities,	Sing in I Rail Stoo	(Checl lth Care Bu gle Asset Ro 1 U.S.C. § road ckbroker amodity Br aring Bank er Tax-Exe (Check bo) tor is a tax- er Title 26 o	eal Estate as 101 (51B)	e) anization I States	Debi	the apter 7 apter 9 apter 11 apter 12	O O O Natur (Chec consumer debts . § 101(8) as ividual primaril	Chapter 15 P f a Foreign I Chapter 15 P f a Foreign I Chapter 15 P f a Foreign I re of Debts ck one box)	one box) etition for R Main Procee etition for R Nonmain Pr	Recognition eding Recognition
attach sign is unable to Filing Fee	to be paid led applicate o pay fee e waiver req	Filing Fee (Cl ed in installments (tion for the cour xcept in installn quested (applicab- tion for the cour	(applicat t's consi nents. Ru	ole to inc deration ale 1006 apter 7 i	certifying t (b). See Offi ndividuals	that the debto icial Form 3A. only). Must	or Check	Debtor c if: Debtor' to insid c all appli A plan Accepta	is a small bus is not a small	business debt oncontingent ss) are less that with this petit lan were solic	s defined in for as define liquidated d in \$2,190,00 ion.	d in 11 U.S ebts (exclude) 0.	.C. § 101(51D). ling debts owed
■ Debtor esti	imates that imates that be no funds		vailable pt prope	rty is ex	cluded and	administrati		es paid,	I- OVER	ТНІ	S SPACE IS I	FOR COURT	USE ONLY
49 Estimated Asso	99 □	199 9	99	5,000	10,000	25,000	50,000	100,000	100,000				
\$0 to \$10,000		\$10,001 to \$100,000		\$100 \$1 r	0,001 to nillion		00,001 to million		More than \$100 million				
Estimated Liab		\$50,001 to \$100,000		□ \$100 \$1 m	0,001 to		00,001 to) million	_	More than \$100 million				

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 2 of 47 Official Form 1 (4/07) FORM B1, Page 2 Name of Debtor(s): Voluntary Petition Coleman, Derek L Coleman, Wanda C (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: This district 04 B 73648 7/20/04 Location Case Number: Date Filed: Where Filed: This District (wife only) 00 B 70192 1/21/00 Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Date Filed: Name of Debtor: Case Number: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10O) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ WILLIAM L. BALSLEY September 26, 2007 Signature of Attorney for Debtor(s) (Date) WILLIAM L. BALSLEY Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Statement by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for

Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

possession was entered, and

Official Form 1 (4/07)

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Coleman, Derek L Coleman, Wanda C

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Derek L Coleman

Signature of Debtor Derek L Coleman

X /s/ Wanda C Coleman

Signature of Joint Debtor Wanda C Coleman

Telephone Number (If not represented by attorney)

September 26, 2007

Date

Signature of Attorney

X /s/ WILLIAM L. BALSLEY

Signature of Attorney for Debtor(s)

WILLIAM L. BALSLEY

Printed Name of Attorney for Debtor(s)

Balsley & Dahlberg, LLP

Firm Name

5130 North Second Street Loves Park, IL 61111

Address

Email: www.balsleylawoffice.com

(815) 877-2593 Fax: (815) 877-7965

Telephone Number

September 26, 2007

Date

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

 \mathbf{v}

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 4 of 47

Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court Northern District of Illinois

	Derek L Coleman			
In re	Wanda C Coleman		Case No.	
		Debtor(s)	Chapter	13

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.] ____

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 5 of 47

Official Form 1, Exh. D (10/06) - Cont.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling
requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor:		/s/ Derek L Coleman
		Derek L Coleman
Date:	September 26, 2007	

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 6 of 47

Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court Northern District of Illinois

	Derek L Coleman			
In re	Wanda C Coleman		Case No.	
		Debtor(s)	Chapter	13
			•	

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.] ____

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 7 of 47

Official Form 1, Exh. D (10/06) - Cont.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling
requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: _	/s/ Wanda C Coleman	
_	Wanda C Coleman	

Date: September 26, 2007

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 8 of 47

Form 6-Summary (10/06)

United States Bankruptcy Court Northern District of Illinois

In re	Derek L Coleman,		Case No	
	Wanda C Coleman			
_		Debtors ,	Chapter	13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	30,500.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		17,000.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	4		11,613.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	8		61,196.41	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			3,193.00
J - Current Expenditures of Individual Debtor(s)	Yes	1			2,518.00
Total Number of Sheets of ALL Schedu	ıles	22			
	T	otal Assets	30,500.00		
			Total Liabilities	89,809.41	

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 9 of 47

Official Form 6 - Statistical Summary (10/06)

United States Bankruptcy Court Northern District of Illinois

In re	Derek L Coleman,		Case No		
	Wanda C Coleman				
_		Debtors	." Chapter	13	_

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. \S 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) (whether disputed or undisputed)	11,613.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)	0.00
Student Loan Obligations (from Schedule F)	5,903.53
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	17,516.53

State the following:

Average Income (from Schedule I, Line 16)	3,193.00
Average Expenses (from Schedule J, Line 18)	2,518.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	7,856.00

State the following:

		-
1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	9,658.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		1,955.00
4. Total from Schedule F		61,196.41
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		63,151.41

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 10 of 47

Form B6A (10/05)

In re	Derek L Coleman,	Case No.
	Wanda C Coleman	

Debtors

SCHEDULE A. REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Wife, Joint, or Community

Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > 0.00 (Total of this page)

Total > 0.00

(Report also on Summary of Schedules)

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 11 of 47

Form B6B (10/05)

In re	Derek L Coleman,	Case No.
	Wanda C Coleman	

Debtors

SCHEDULE B. PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

	Type of Property	N O Description and Location of Propert E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	X		
2.	Checking, savings or other financial	National City Bank/ savings	Н	25.00
	accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and	National City Bank/ checking	Н	25.00
	homestead associations, or credit unions, brokerage houses, or	National City Bank/ checking	W	25.00
	cooperatives.	Harvard Community Credit Union/ savings	J	25.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Misc. household goods and furnishings	J	2,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6.	Wearing apparel.	Clothing and personal items	J	400.00
7.	Furs and jewelry.	х		
8.	Firearms and sports, photographic, and other hobby equipment.	X		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Life insurance policies - no cash value	J	0.00
10	Annuities. Itemize and name each issuer.	X		

2 continuation sheets attached to the Schedule of Personal Property

2,500.00

Sub-Total >

(Total of this page)

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 12 of 47

Form B6B (10/05)

In re	Derek L Coleman,	Case No.
	Wanda C Coleman	

Debtors

SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

		(Continuation Sheet)		
Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)).	Х			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	Interest in	403B Plan	W	4,000.00
 Stock and interests in incorporated and unincorporated businesses. Itemize. 	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
 Government and corporate bonds and other negotiable and nonnegotiable instruments. 	X			
16. Accounts receivable.	Χ			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
 Other liquidated debts owing debtor including tax refunds. Give particulars. 	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
 Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. 	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	Х			
		(T.	Sub-Tota of this page)	al > 4,000.00

Sheet 1 of 2 continuation sheets attached to the Schedule of Personal Property

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 13 of 47

Form B6B (10/05)

In re Derek L Coleman,
Wanda C Coleman

Debtors

SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	Х			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and	20	00 Lexus GS 400	J	12,000.00
	other vehicles and accessories.	20	02 Chevrolet Suburban	J	12,000.00
26.	Boats, motors, and accessories.	Χ			
27.	Aircraft and accessories.	Χ			
28.	Office equipment, furnishings, and supplies.	Χ			
29.	Machinery, fixtures, equipment, and supplies used in business.	Χ			
30.	Inventory.	Χ			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	Χ			
33.	Farming equipment and implements.	Χ			
34.	Farm supplies, chemicals, and feed.	Χ			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > (Total of this page)

24,000.00

Total >

30,500.00

Sheet 2 of 2 continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 14 of 47

Form B6C (4/07)

In re	Derek L Coleman,	Case No.
	Wanda C Coleman	

Debtors

SCHEDULE C. PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

Check if debtor claims a homestead exemption that exceeds \$136,875.

☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Household Goods and Furnishings Misc. household goods and furnishings	735 ILCS 5/12-1001(b)	2,000.00	2,000.00
Wearing Apparel Clothing and personal items	735 ILCS 5/12-1001(a)	400.00	400.00
Interests in IRA, ERISA, Keogh, or Other Pension or P Interest in 403B Plan	rofit Sharing Plans 735 ILCS 5/12-1006	100%	4,000.00
Automobiles, Trucks, Trailers, and Other Vehicles 2000 Lexus GS 400	735 ILCS 5/12-1001(c)	2,400.00	12,000.00
2002 Chevrolet Suburban	735 ILCS 5/12-1001(c)	2,400.00	12,000.00

Total: 11,200.00 30,400.00

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 15 of 47

Official Form 6D (10/06)

In re	Derek L Coleman,	Case No.
	Wanda C Coleman	

Debtors

SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

	Ť		area ciamis to report on this schedule D.		_	_	-	
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COXFLXGEXF	LIQUI	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 4933-0006			3-07	Т	D A T E D			
HARVARD COMMUNITY CREDIT UNION 1200 S. Division Street Harvard, IL 60033-8601		J	non purchase money 2000 Lexus GS 400 value \$12,000.00 2002 Chevrolet Suburban- value \$12,000.00 Value \$ 24,000.00				17,000.00	0.00
Account No.		T						
Account No.			Value \$					
Account No.			Value \$					
Account No.			Value \$					
_0 continuation sheets attached		1			tota pag		17,000.00	0.00
Total (Report on Summary of Schedules)						17,000.00	0.00	

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 16 of 47

Official Form 6E (4/07)

In re	Derek L Coleman, Wanda C Coleman		Case No.	
-		Debtors	,	

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

■ Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trust or the order for relief. 11 U.S.C. § 507(a)(3).

☐ Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ Deposits by individuals

Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered provided. 11 U.S.C. § 507(a)(7).

■ Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

3 continuation sheets attached

^{*} Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 17 of 47

Official Form 6E (4/07) - Cont

In re	Derek L Coleman,		Case No.	
	Wanda C Coleman			
-		Debtors		

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Domestic Support Obligations

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community DISPUTED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, NL I QUI DATED ONTINGENT AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) domestic support obligations Account No. LAKEISHA PHILLIPS 0.00 c/o Illinois Dept. of Child Support 1114 Taylor Street J Rockford, IL 61101 0.00 0.00 domestic support obligations Account No. LASHONDA CHAMBERS 0.00 432 North Lenmington Avenue Chicago, IL 60644 J 0.00 0.00 Account No. Account No. Account No. Subtotal 0.00 Sheet 1 of 3 continuation sheets attached to

(Total of this page)

Schedule of Creditors Holding Unsecured Priority Claims

0.00

0.00

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 18 of 47

Official Form 6E (4/07) - Cont

In re	Derek L Coleman,	Case No.
	Wanda C Coleman	

Debtors

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ODEBTOR ONTINGENT NLIQUIDATED SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED AMOUNT INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) 2006 income taxes Account No. ILLINOIS DEPARTMENT OF REVENUE 0.00 Bankruptcy, Bulk Sales & Probate 100 W. Randolph St. L Н Chicago, IL 60601-3195 757.00 757.00 2002 income taxes Account No. INTERNAL REVENUE SERVICE 1,955.00 230 S. Dearborn Mail Stop 5010 CHI W Chicago, IL 60604 1,955.00 0.00 income taxes for 2004 Account No. INTERNAL REVENUE SERVICE 0.00 Centralized Insolvency Operation P.O. Box 21126 J Philadelphia, PA 19114 916.00 916.00 income taxes for 2005 Account No. INTERNAL REVENUE SERVICE 0.00 Centralized Insolvency Operation P.O. Box 21126 W Philadelphia, PA 19114 1,885.00 1,885.00 Account No. income taxes for 2006 INTERNAL REVENUE SERVICE 0.00 230 S. Dearborn Mail Stop 5010 CHI Η Chicago, IL 60604 2,052.00 2,052.00 Subtotal 1,955.00 Sheet 2 of 3 continuation sheets attached to

(Total of this page)

Schedule of Creditors Holding Unsecured Priority Claims

7,565.00

5,610.00

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 19 of 47

Official Form 6E (4/07) - Cont.

In re	Derek L Coleman,		Case No.	
	Wanda C Coleman			
•		Debtors	-,	

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ODEBTOR NL I QUI DATED ONTINGENT SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** W INCLUDING ZIP CODE, AND CONSIDERATION FOR CLAIM OF CLAIM C AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER (See instructions.) income taxes for 2006 Account No. INTERNAL REVENUE SERVICE 0.00 Centralized Insolvency Operation P.O. Box 21126 W Philadelphia, PA 19114 4,048.00 4,048.00 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet 3 of 3 continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 4,048.00 4,048.00 1,955.00

(Report on Summary of Schedules)

9,658.00

11,613.00

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 20 of 47

Official Form 6F (10/06)

In re	Derek L Coleman,	Case No.
	Wanda C Coleman	
	Debtors	 ,

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	C	Н	usband, Wife, Joint, or Community	C	U	D	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C N H	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETORE SO STATE	NT I NG EN	UNLIQUIDA	I SPUTED	AMOUNT OF CLAIM
Account No.			collection for misc. accounts	T	D A T E D		
ACCOUNTS RECEIVABLE MANAGEMENT 7507 N. Second Street, Unit C Machesney Park, IL 61115		J					250.00
Account No.		T	collection for misc. accounts			\dagger	
AMERICOLLECT P.O. Box 1566 814 S. 8th Street Manitowoc, WI 54221		J					645.00
Account No. CERTEGY CHECK SERVICES,INC. P.O. Box 30046 Tampa, FL 33630		J	collections for: Marshalls and other misc. accounts				145.00
Account No.		╁	medical	\perp	+	+	115.00
CHILDREN'S MEMORIAL HOSPITAL 2300 Children's Plaza Chicago, IL 60614		J					3,000.00
	•		(Total	Sub of this			4,010.00

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 21 of 47

Official Form 6F (10/06) - Cont.

In re	Derek L Coleman,	Case No.
	Wanda C Coleman	

GDEDWOOD WALKE	С	Hu	sband, Wife, Joint, or Community	С	Ιυ	D	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTLNGEN	Ι'n	DISPUTED	AMOUNT OF CLAIM
Account No.			utilities	Т	T E D		
COMMONWEALTH EDISON COMPANY Attention: Credit Department 2100 Swift Drive Oak Brook, IL 60523		J					360.00
Account No.			deficiency balance on auto loan	\dagger			
CREDIT ACCEPTANCE CORPORATION Attn: Bankruptcy Department 25505 West 12 Mile Road, Suite 3000 Southfield, MI 48034-8339		J					2,000.00
Account No. 4447-9621-2266-8266			misc. charges				
CREDIT ONE BANK P.O. Box 98873 Las Vegas, NV 89193		J					250.00
Account No.	┝		collection for misc. accounts	+			
CREDITORS' PROTECTION SERVICE 202 W. State St, 3rd Floor P.O. Box 4115 Rockford, IL 61110		J					4,606.00
Account No.	\vdash		medical	+		\vdash	·
CRUSADER CLINIC 1200 West State Street Rockford, IL 61102		J					221.80
Sheet no1 of _7 sheets attached to Schedule of				Sub	tota	1	221.00
Creditors Holding Unsecured Nonpriority Claims			(Total of				7,437.80

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 22 of 47

Official Form 6F (10/06) - Cont.

In re	Derek L Coleman,	Case No.
	Wanda C Coleman	

GD DD WOOD IS NAME.	С	Тн	usband, Wife, Joint, or Community	С	Ιυ	D	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGEN	ľ	DISPUTED	AMOUNT OF CLAIM
Account No.			student loan	7	T E D		
DIRECT LOANS P.O. Box 5609 Greenville, TX 75403-5609		J					2,500.00
Account No.		H	merchandise	+	$^{+}$	H	
FASHION BUG c/o Spirit of America National Bank P.O. Box 896 Milford, OH 45150		J					273.00
Account No.			collections for Bally's and other misc. accounts	+	$\frac{1}{1}$		
FINANCIAL CREDIT P.O. Box 2036 Warren, MI 48090		J					2,518.57
Account No.	+	+	misc. charges	+	+		_,0.000
FIRST PREMIER BANK P.O. Box 5519 Sioux Falls, SD 57117-5519		J					322.00
Account No.	\dashv		deficiency balance on auto loan	+	+	\vdash	
FIVE AND DRIVE AUTO SALES, INC. 4840 North Second Street Loves Park, IL 61111		J					5,000.00
Sheet no. 2 of 7 sheets attached to Schedule	of.			Sub	tota	1	3,000.00
Creditors Holding Unsecured Nonpriority Claims	01		(Total of				10,613.57

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 23 of 47

Official Form 6F (10/06) - Cont.

In re	Derek L Coleman,	Case No.
	Wanda C Coleman	

CDEDITORIS NAME	С	Hu	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	N L I QU I D A	D I S P U T E D	AMOUNT OF CLAIM
Account No.			nsf checks	Т	T E		
GRAND VICTORIA RIVERBOAT 250 South Grove Elgin, IL 60120		J			D		2,000.00
Account No.			collections for Sprint, and other misc. accounts				2,000.00
I.C. SYSTEMS 444 East Highway 96 P.O. Box 64378 St. Paul, MN 55764-0378		J					F00.44
Account No.	┡		overpayments		-		566.41
I.D.E.S. 850 E. Madison Street Springfield, IL 62701		J	overpayments				500.00
Account No.			phone services				000.00
MCI Attention: APD 500 Technology Drive, Suite 820 Weldon Spring, MO 63304		J					78.00
Account No.	\vdash		collection for misc. accounts	+		\vdash	7 51.00
MEDCLEAR INC. P.O. Box 8545 Philadelphia, PA 19101		J					792.00
Sheet no3 of _7 sheets attached to Schedule of				Sub	tots	 al	
Creditors Holding Unsecured Nonpriority Claims			(Total of				3,936.41

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 24 of 47

Official Form 6F (10/06) - Cont.

In re	Derek L Coleman,	Case No.
	Wanda C Coleman	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community		2	U	D	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C N T I N C E N C C C C C C C C C		NL QU L DAT		AMOUNT OF CLAIM
Account No.			medical	Т		T E D		
MERCY HEALTH SYSTEM Mercy Hospital 1000 Mineral Point Avenue Janesville, WI 53547-5003		J				D		600.00
Account No.			collection for misc. accounts	\dagger	†	1		
MUTUAL MANAGEMENT SERVICES 401 E. State St., 2nd Floor P.O. Box 4777 Rockford, IL 61110		J						1,346.00
Account No.	┢		bank charges		+	+		,
NATIONAL CITY BANK P.O. Box 94982 Attn: Bankruptcy Department Cleveland, OH 44101		J						100.00
Account No.			collection for misc. accounts		\dagger	1		
NCO FINANCIAL SYSTEMS 507 Prudential Road Horsham, PA 19044		J						106.00
Account No. 832040487	\vdash		utilities	+	+	+		
NICOR GAS COMPANY P.O. Box 549 Aurora, IL 60507		J						
								930.00
Sheet no. <u>4</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total	Sul of this				3,082.00

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 25 of 47

Official Form 6F (10/06) - Cont.

In re	Derek L Coleman,	Case No
	Wanda C Coleman	

CREDITOR'S NAME,	C	H	usband, Wife, Joint, or Community	Č	Ų	D		
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J H	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	Q U			AMOUNT OF CLAIM
Account No.	1		medical	'	Ė			
PHYSICIANS IMMEDIATE CARE 4350 Morsay Drive Rockford, IL 61107		J			D			600.00
Account No.		T	collections for: SBC and other misc. accounts			T	1	
PORTFOLIO RECOVERY P.O. Box 12914 Norfolk, VA 23541	-	J						319.10
Account No.	t	+	medical	H		t	+	
ROCKFORD HEALTH SYSTEMS Rockford Memorial Hospital 2400 N. Rockton Avenue Rockford, IL 61103		J						12,000.00
Account No.	1	T	medical			t	1	
ROCKFORD HEALTH SYSTEMS Rockford Clinic 2300 N. Rockton Avenue Rockford, IL 61103		J						1,250.00
Account No.	T	\top	collection for misc. accounts	t	T	t	7	
ROCKFORD MERCANTILE AGENCY 2502 S. Alpine Road Rockford, IL 61108		J						6,146.00
Sheet no. <u>5</u> of <u>7</u> sheets attached to Schedule of		_		Sub	tota	al	7	
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	١	20,315.10

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 26 of 47

Official Form 6F (10/06) - Cont.

In re	Derek L Coleman,	Case No.
_	Wanda C Coleman	

Account No. ST. ANTHONY MEDICAL CENTER S666 E. State Street Rockford, IL 61108 Account No. STATE OF IL., DePT. OF EMP. SEC. Benefit Payment Control Als. Student Ioan STATE OF IL., DePT. OF EMP. SEC. Benefit Payment Control Als. Student Ioan Account No. U.S. DEPARTMENT OF EDUCATION Direct Loan Servicing Center P.O. Box 4609 Utica, NY 13504-4609 Sheet no. 6. of .Z. sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims Sheet no. 6. of .Z. sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims Table 10 Amount of CILAIM And SINCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. To DATE CLAIM WAS INCURRED AND CURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. To DATE CLAIM WAS INCURRED AND TO STATE. To DATE CLAIM WAS						_		
AND ACCOUNT NUMBER (See instructions above.) Account No. SPRINT Anderson Financial 404 Brock Drive Bloomington, IL 61701 Account No. ST. ANTHONY MEDICAL CENTER 5666 E. State Street Rockford, IL 61108 STATE OF IL., DEPT. OF EMP. SEC. Benefit Payment Control 401 S. State St., 4th Floor Chicago, IL 60605 Account No. U.S. DEPARTMENT OF EDUCATION Direct Loan Servicing Center P.O. Box 4609 Utica, NY 13504-4609 Sheet no. 6 of .7 sheets attached to Schedule of Subdotal States attached to Schedule of Subdotal Subdotal Subdotal Subdotal AMOUNT OF CLAIM IS CLAIM IN CLAIM IS CLAIM IN CLAIM IS CLAI	CREDITOR'S NAME,	C	Ηι	sband, Wife, Joint, or Community	S	U N	P	
AND ACCOUNT NUMBER (See instructions above.) Account No. SPRINT Anderson Financial 404 Brock Drive Bloomington, IL 61701 Account No. ST. ANTHONY MEDICAL CENTER 5666 E. State Street Rockford, IL 61108 STATE OF IL., DEPT. OF EMP. SEC. Benefit Payment Control 401 S. State St., 4th Floor Chicago, IL 60605 Account No. U.S. DEPARTMENT OF EDUCATION Direct Loan Servicing Center P.O. Box 4609 Utica, NY 13504-4609 Sheet no. 6 of .7 sheets attached to Schedule of Subdotal States attached to Schedule of Subdotal Subdotal Subdotal Subdotal AMOUNT OF CLAIM IS CLAIM IN CLAIM IS CLAIM IN CLAIM IS CLAI	AND MAILING ADDRESS	Ď		DATE CLAIM WAS INCUDDED AND	Ň	Ë	S	
Account No. SPRINT Anderson Financial 404 Brock Drive Bloomington, IL 61701 Account No. ST. ANTHONY MEDICAL CENTER 5666 E. State Street Rockford, IL 61108 ST. ANTHONY MEDICAL CENTER 5666 E. State Street Rockford, IL 61108 STATE OF IL., DEPT. OF EMP. SEC. Benefit Payment Control 401 S. State St., 4th Floor Chicago, IL 60605 Account No. U.S. DEPARTMENT OF EDUCATION Direct Loan Servicing Center P.O. Box 4609 Utica, NY 13504-4609 Account No. UIC CLINICS P.O. Box 4699 Rockford, IL 61110-4689 Sheet no. 6 of 7 sheets attached to Schedule of Subtotal		B			1	Q	įυ	
Account No. SPRINT Anderson Financial 404 Brock Drive Bloomington, IL 61701 Account No. ST. ANTHONY MEDICAL CENTER 5666 E. State Street Rockford, IL 61108 ST. ANTHONY MEDICAL CENTER 5666 E. State Street Rockford, IL 61108 STATE OF IL., DEPT. OF EMP. SEC. Benefit Payment Control 401 S. State St., 4th Floor Chicago, IL 60605 Account No. U.S. DEPARTMENT OF EDUCATION Direct Loan Servicing Center P.O. Box 4609 Utica, NY 13504-4609 Account No. UIC CLINICS P.O. Box 4699 Rockford, IL 61110-4689 Sheet no. 6 of 7 sheets attached to Schedule of Subtotal		6			G		ΙE	AMOUNT OF CLAIM
SPRINT	(See instructions above.)	R	ľ	·	E N	D	D	
SPRINT Anderson Financial 404 Brock Drive Bloomington, IL 61701 335.00 335.00	Account No.			phone service	Т	E		
Anderson Financial 404 Brock Drive Bloomington, IL 61701 Account No. ST. ANTHONY MEDICAL CENTER 5666 E. State Street Rockford, IL 61108 Account No. STATE OF IL., DEPT. OF EMP. SEC. Benefit Payment Control 401 S. State St., 4th Floor Chicago, IL 60605 Account No. U.S. DEPARTMENT OF EDUCATION Direct Loan Servicing Center P.O. Box 4609 Ulica, NY 13504-4609 UIC CLINICS P.O. Box 4689 Rockford, IL 61110-4689 Subtotal Set of T_ sheets attached to Schedule of Subtotal J 158253	CDDINT							-
404 Brock Drive Bloomington, IL 61701 Account No. ST. ANTHONY MEDICAL CENTER 5666 E. State Street Rockford, IL 61108 Account No. STATE OF IL., DEPT. OF EMP. SEC. Benefit Payment Control 401 S. State St., 4th Floor Chicago, IL 60605 T,500.00 Account No. U.S. DEPARTMENT OF EDUCATION Direct Loan Servicing Center P.O. Box 4609 Utica, NY 13504-4609 UIC CLINICS P.O. Box 4699 Rockford, IL 61110-4689 Sheet no6 _ of _T sheets attached to Schedule of Subtotal 158253			l٠					
Bloomington, IL 61701 335.00 Account No.			١					
335.00 335.00 Account No. medical								
Account No. ST. ANTHONY MEDICAL CENTER 5666 E. State Street Rockford, IL 61108 89.00 Account No. STATE OF IL., DEPT. OF EMP. SEC. Benefit Payment Control 401 s. State St., 4th Floor Chicago, IL 60605 7,500.00 Account No. U.S. DEPARTMENT OF EDUCATION Direct Loan Servicing Center P.O. Box 4609 Utica, NY 13504-4609 UIC CLINICS P.O. Box 4689 Rockford, IL 61110-4689 Subtotal Subtotal	Bloomington, IL 61701							005.00
ST. ANTHONY MEDICAL CENTER								335.00
State Street Stat	Account No.			medical				
State Street Stat								
Rockford, IL 61108 89.00			١.					
Account No. STATE OF IL., DEPT. OF EMP. SEC. Benefit Payment Control 401 S. State St., 4th Floor Chicago, IL 60605 Account No. U.S. DEPARTMENT OF EDUCATION Direct Loan Servicing Center P.O. Box 4609 Utica, NY 13504-4609 J medical Mic CLINICS P.O. Box 4689 Rockford, IL 61110-4689 Sheet no. 6 of 7 sheets attached to Schedule of Subtotal			J					
Account No. STATE OF IL., DEPT. OF EMP. SEC. Benefit Payment Control 401 S. State St., 4th Floor Chicago, IL 60605 Account No. U.S. DEPARTMENT OF EDUCATION Direct Loan Servicing Center P.O. Box 4609 Utica, NY 13504-4609 J medical Medical J medical Student loan J procedure No. UIC CLINICS P.O. Box 4689 Rockford, IL 61110-4689 Sheet no. 6 of 7 sheets attached to Schedule of	Rockford, IL 61108							
Account No. STATE OF IL., DEPT. OF EMP. SEC. Benefit Payment Control 401 S. State St., 4th Floor Chicago, IL 60605 Account No. U.S. DEPARTMENT OF EDUCATION Direct Loan Servicing Center P.O. Box 4609 Utica, NY 13504-4609 J medical Medical J medical Subtotal Subtotal								
STATE OF IL., DEPT. OF EMP. SEC. Benefit Payment Control 401 S. State St., 4th Floor Chicago, IL 60605 Account No. U.S. DEPARTMENT OF EDUCATION Direct Loan Servicing Center P.O. Box 4609 Utica, NY 13504-4609 J medical UIC CLINICS P.O. Box 4689 Rockford, IL 61110-4689 Sheet no. 6 of 7 sheets attached to Schedule of Subtotal								89.00
Benefit Payment Control 401 S. State St., 4th Floor 7,500.00	Account No.			overpayments				
Benefit Payment Control 401 S. State St., 4th Floor 7,500.00		1						
401 S. State St., 4th Floor Chicago, IL 60605 Account No. U.S. DEPARTMENT OF EDUCATION Direct Loan Servicing Center P.O. Box 4609 Utica, NY 13504-4609 J Medical J Medical J Sheet no. 6 of 7 sheets attached to Schedule of Subtotal 7,500.00 7,500.00 7,500.00 7,500.00 8tudent loan J Medical 1,582.53								
Chicago, IL 60605			J					
7,500.00	401 S. State St., 4th Floor							
Account No.	Chicago, IL 60605							
U.S. DEPARTMENT OF EDUCATION Direct Loan Servicing Center P.O. Box 4609 Utica, NY 13504-4609 Account No. UIC CLINICS P.O. Box 4689 Rockford, IL 61110-4689 Sheet no. 6 of 7 sheets attached to Schedule of								7,500.00
Direct Loan Servicing Center	Account No.	t		student loan				
Direct Loan Servicing Center		1						
P.O. Box 4609 Utica, NY 13504-4609 Account No. UIC CLINICS P.O. Box 4689 Rockford, IL 61110-4689 Sheet no. 6 of 7 sheets attached to Schedule of Subtotal	U.S. DEPARTMENT OF EDUCATION							
P.O. Box 4609 Utica, NY 13504-4609 Account No. UIC CLINICS P.O. Box 4689 Rockford, IL 61110-4689 Sheet no. 6 of 7 sheets attached to Schedule of Subtotal	Direct Loan Servicing Center		J					
Account No. UIC CLINICS P.O. Box 4689 Rockford, IL 61110-4689 Sheet no. 6 of 7 sheets attached to Schedule of								
Account No. UIC CLINICS P.O. Box 4689 Rockford, IL 61110-4689 Sheet no. 6 of 7 sheets attached to Schedule of	Utica, NY 13504-4609							
UIC CLINICS P.O. Box 4689 Rockford, IL 61110-4689 Sheet no6 of _7 sheets attached to Schedule of Subtotal								3,403.53
UIC CLINICS P.O. Box 4689 Rockford, IL 61110-4689 Sheet no6 of _7 sheets attached to Schedule of Subtotal	Account No.	t	t	medical		\vdash		
P.O. Box 4689 Rockford, IL 61110-4689 Sheet no. 6 of 7 sheets attached to Schedule of Subtotal		1						
Rockford, IL 61110-4689 255.00 Sheet no. 6 of 7 sheets attached to Schedule of Subtotal	UIC CLINICS	1						
Sheet no. <u>6</u> of <u>7</u> sheets attached to Schedule of Subtotal 11 582 53	P.O. Box 4689		J					
Sheet no. <u>6</u> of <u>7</u> sheets attached to Schedule of Subtotal 11 582 53	Rockford, IL 61110-4689	1						
Sheet no. 6 of 7 sheets attached to Schedule of Subtotal								
I 11 582 53								255.00
I 11 582 53	Sheet no. 6 of 7 sheets attached to Schedule of		_	5	Subt	ota	1	
								11,582.53

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 27 of 47

Official Form 6F (10/06) - Cont.

In re	Derek L Coleman,	Case No.
	Wanda C Coleman	

CREDITOR'S NAME,	CO	Hu	Isband, Wife, Joint, or Community	CO	U N	D	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	LIQUIDA	D I S P U T E D	AMOUNT OF CLAIM
Account No.			collection for misc. accounts	Ť	TE		
UNITED CREDIT SERVICE, INC. 15 North Lincoln Street P.O. Box 740 Elkhorn, WI 53121-0740		J			D		219.00
Account No.	┝			\vdash	\vdash	+	
. Account 1 (o.							
Account No.					t		
Account No.					T	T	
Account No.	-						
Sheet no7 of _7 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Sub his			219.00
creators froming onsecured fromphiotity Claims			(Total of t		ρα <u>ε</u> Γota		
			(Report on Summary of So				61,196.41

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 28 of 47

Form B6G (10/05)

In re	Derek L Coleman,	Case No.	
	Wanda C Coleman		

Debtors

SCHEDULE G. EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

____ continuation sheets attached to Schedule of Executory Contracts and Unexpired Leases

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 29 of 47

Form B6H (10/05)

In re	Derek L Coleman,	Case No.
	Wanda C Coleman	

Debtors

SCHEDULE H. CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 30 of 47

Official Form 6I (10/06)

	Derek L Coleman			
In re	Wanda C Coleman		Case No.	
		Debtor(s)	·	

SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is

Debtor's Marital Status:	d and a joint petition is not filed. Do not state the nan DEPENDENTS (
Married	RELATIONSHIP(S): Husband's child Husband's child Wife's child (disabled) Husband's child Husband's child Husband's child	A	GE(S): 11 y 14 y 21 y 7 yrs 8 yrs 9 yrs	rs. ears 6.		
Employment:	DEBTOR	<u> </u>	O yic	SPOUSE		
	personal care	LPN				
Name of Employer	DORRS	MERCY	HEALT	H SYSTEM		
How long employed	2 yrs.	2 yrs.				
Address of Employer				oint Avenue		
	Springfield, IL	Janesvil	le, WI 5	3545		
	or projected monthly income at time case filed)			DEBTOR		SPOUSE
	and commissions (Prorate if not paid monthly)		\$	1,446.00	\$	3,550.00
2. Estimate monthly overtime			\$	0.00	\$	0.00
3. SUBTOTAL			\$	1,446.00	\$_	3,550.00
4. LESS PAYROLL DEDUCTION a. Payroll taxes and social soc	ecurity I support	<u></u>	\$ \$ \$ \$	157.00 0.00 20.00 760.00 0.00	\$ \$ \$ \$	606.00 200.00 0.00 0.00 60.00
5. SUBTOTAL OF PAYROLL I	DEDUCTIONS		\$	937.00	\$	866.00
6. TOTAL NET MONTHLY TA	AKE HOME PAY		\$	509.00	\$_	2,684.00
7. Regular income from operatio	n of business or profession or farm (Attach detailed	l statement)	\$	0.00	\$	0.00
8. Income from real property	•		\$	0.00	\$	0.00
9. Interest and dividends			\$	0.00	\$	0.00
10. Alimony, maintenance or sup that of dependents listed abo11. Social security or government		tor's use or	\$	0.00	\$	0.00
(Specify):	it dissistance		\$	0.00	\$	0.00
(Speeny).			\$ —	0.00	\$ <u> </u>	0.00
12. Pension or retirement income	<u> </u>		\$ <u></u>	0.00	\$ 	0.00
13. Other monthly income			Ψ	0.00	Ψ	0.00
(Specify):			\$	0.00	\$	0.00
			\$	0.00	\$	0.00
14. SUBTOTAL OF LINES 7 T	HROUGH 13		\$	0.00	\$_	0.00
15. AVERAGE MONTHLY INC	COME (Add amounts shown on lines 6 and 14)		\$	509.00	\$_	2,684.00
	ONTHLY INCOME: (Combine column totals ofter repeat total reported on line 15)			\$	3,193	.00

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 31 of 47

Official Form 6J (10/06)

In re	Derek L Coleman Wanda C Coleman		Case No.	
		Debtor(s)		

SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

SCHEDULE 3. CORRENT EXTENDITORES OF INDIVIDUAL	DEDI	OK(b)
Complete this schedule by estimating the average or projected monthly expenses of the debtor and the filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.	e debtor's fa	amily at time case
\Box Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse."	ete a separat	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,295.00
a. Are real estate taxes included? Yes No _X	Ψ	,
b. Is property insurance included? Yes No _X		
2. Utilities: a. Electricity and heating fuel	\$	175.00
b. Water and sewer	\$	0.00
c. Telephone	\$	0.00
d. Other phone & cable	\$	125.00
3. Home maintenance (repairs and upkeep)	\$	0.00
4. Food	\$	400.00
5. Clothing	\$	25.00
6. Laundry and dry cleaning	\$	25.00
7. Medical and dental expenses	\$	25.00
8. Transportation (not including car payments)	\$	150.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	50.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)	T	
a. Homeowner's or renter's	\$	0.00
b. Life	\$	0.00
c. Health	\$	0.00
d. Auto	\$	0.00
e. Other car & renters	\$	148.00
12. Taxes (not deducted from wages or included in home mortgage payments)	Ψ	1.0.00
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the	Ψ	
plan)		
a. Auto	\$	0.00
	\$	0.00
o Othor	\$	0.00
d. Other	\$ 	0.00
	· -	
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other personal care items & uniforms	\$	100.00
Other	\$	0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	2,518.00
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:		
20. STATEMENT OF MONTHLY NET INCOME		
a. Average monthly income from Line 15 of Schedule I	\$	3,193.00
b. Average monthly expenses from Line 18 above	\$	2,518.00
c. Monthly net income (a. minus b.)	\$	675.00

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 32 of 47

Official Form 6-Declaration. (10/06)

United States Bankruptcy Court Northern District of Illinois

	Derek L Coleman			
In re	Wanda C Coleman		Case No.	
		Debtor(s)	Chapter	13
			-	

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

	I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 24 sheets [total shown on summary page plus 2], and that they are true and correct to the best of my knowledge, information, and belief.				
Date	September 26, 2007	Signature	/s/ Derek L Coleman Derek L Coleman Debtor		
Date	September 26, 2007	Signature	/s/ Wanda C Coleman Wanda C Coleman Joint Debtor		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 33 of 47

Official Form 7 (04/07)

United States Bankruptcy Court Northern District of Illinois

	Derek L Coleman			
In re	Wanda C Coleman		Case No.	
		Debtor(s)	Chapter	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\$10,850.00	Husband-2007
\$12,000.00	2006
\$7,000.00	2005
\$51,280.00	Wife-2007
\$82,416.00	2006
\$42,000.00	2005

COLIDOR

AMOUNT

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

Have had some gambling winnings and losses \$0.00

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL OF CREDITOR **PAYMENTS** AMOUNT PAID OWING

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days

immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,475. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> AMOUNT DATES OF PAID OR PAYMENTS/ VALUE OF AMOUNT STILL **TRANSFERS TRANSFERS OWING**

NAME AND ADDRESS OF CREDITOR

All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND

AMOUNT STILL

RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

OWING

2

4. Suits and administrative proceedings, executions, garnishments and attachments

None

Philadelphia, PA 19114

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT COURT OR AGENCY STATUS OR NATURE OF PROCEEDING AND CASE NUMBER AND LOCATION DISPOSITION

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately П preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED INTERNAL REVENUE SERVICE September, 2007 Centralized Insolvency Operation P.O. Box 21126

DESCRIPTION AND VALUE OF DATE OF SEIZURE

PROPERTY levy on wages (wife)

3

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION,
FORECLOSURE SALE,
TRANSFER OR RETURN

DESCRIPTION AND VALUE OF
PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning

property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

filed.)

NAME AND LOCATION

NAME AND ADDRESS OF COURT DATE OF DESCRIPTION AND VALUE OF

OF CUSTODIAN CASE TITLE & NUMBER ORDER PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 36 of 47

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 37 of 47

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 5544 Wickford Loves Park. IL

NAME USED same

DATES OF OCCUPANCY 5 years prior to 4-07

5

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF **GOVERNMENTAL UNIT**

DATE OF

ENVIRONMENTAL

NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 38 of 47

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOC. SEC. NO./ COMPLETE EIN OR OTHER TAXPAYER

I.D. NO. ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

6

None

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	September 26, 2007	Signature	/s/ Derek L Coleman
			Derek L Coleman
			Debtor
Date	September 26, 2007	Signature	/s/ Wanda C Coleman
			Wanda C Coleman
			Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 39 of 47
United States Bankruptcy Court
Northern District of Illinois

	Derek L Coleman			
In re	Wanda C Coleman		Case No.	
		Debtor(s)	Chapter	13

In re	Wanda C Coleman	1		Case No.	
			Debtor(s)	Chapter	13
	DISCL	OSURE OF COM	PENSATION OF ATTOR	RNEY FOR DE	EBTOR(S)
C	compensation paid to me	within one year before th	y Rule 2016(b), I certify that I a see filing of the petition in bankruptcy tion of or in connection with the bankruptcy	y, or agreed to be pai	d to me, for services rendered or to
	For legal services, I	have agreed to accept		\$	3,500.00
	Prior to the filing of	this statement I have rece	ived	\$	0.00
	Balance Due			\$	3,500.00
2. \$	\$ 68.50 of the filing	fee has been paid.			
3.	The source of the comper	nsation paid to me was:			
	■ Debtor □	Other (specify):			
4. T	The source of compensati	ion to be paid to me is:			
	■ Debtor □	Other (specify):			
5.	■ I have not agreed to s	share the above-disclosed	compensation with any other person	unless they are mem	bers and associates of my law firm.
			pensation with a person or persons we names of the people sharing in the		
a l	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.				
7. I		n of the debtors in any o	ed fee does not include the following dischargeability actions, judicial lie		ef from stay actions or any
			CERTIFICATION		
	certify that the foregoing ankruptcy proceeding.	g is a complete statement of	of any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
Dated	l: September 26, 200	07	_/s/ WILLIAM L. BA		
			WILLIAM L. BALS Balsley & Dahlber		

5130 North Second Street Loves Park, IL 61111

www.balsleylawoffice.com

(815) 877-2593 Fax: (815) 877-7965

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

<u>Chapter 7</u>: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 41 of 47

B 201 (04/09/06)

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Attorney

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

, ,	1					
WILLIAM L. BALSLEY	X /s/ WILLIAM L. BALSLEY	September 26, 2007				
Printed Name of Attorney	Signature of Attorney	Date				
Address:						
5130 North Second Street						
Loves Park, IL 61111						
(815) 877-2593						
Certificate of Debtor I (We), the debtor(s), affirm that I (we) have received and read this notice.						
Derek L Coleman						
Wanda C Coleman	X /s/ Derek L Coleman	September 26, 2007				
Printed Name of Debtor	Signature of Debtor	Date				
Case No. (if known)	X /s/ Wanda C Coleman	September 26, 2007				
	Signature of Joint Debtor (if any)	Date				

Case 07-72299 Doc 1 Filed 09/26/07 Entered 09/26/07 11:19:04 Desc Main Document Page 42 of 47

United States Bankruptcy Court Northern District of Illinois

In re	Derek L Coleman Wanda C Coleman		Case No.	
		Debtor(s)	Chapter	13
	VEI	RIFICATION OF CREDITOR M.	ATRIX	
		Number of 0	Creditors:	41_
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditor	ors is true and c	orrect to the best of my
Date:	September 26, 2007	/s/ Derek L Coleman Derek L Coleman		
		Signature of Debtor		
Date:	September 26, 2007	/s/ Wanda C Coleman		
		Wanda C Coleman		
		Signature of Debtor		

ACCOUNTS RECEIVABLE MANAGEMENT 7507 N. Second Street, Unit C Machesney Park, IL 61115

AMERICOLLECT P.O. Box 1566 814 S. 8th Street Manitowoc, WI 54221

CERTEGY CHECK SERVICES, INC. P.O. Box 30046 Tampa, FL 33630

CHILDREN'S MEMORIAL HOSPITAL 2300 Children's Plaza Chicago, IL 60614

COMMONWEALTH EDISON COMPANY Attention: Credit Department 2100 Swift Drive Oak Brook, IL 60523

CREDIT ACCEPTANCE CORPORATION Attn: Bankruptcy Department 25505 West 12 Mile Road, Suite 3000 Southfield, MI 48034-8339

CREDIT ONE BANK
P.O. Box 98873
Las Vegas, NV 89193

CREDITORS' PROTECTION SERVICE 202 W. State St, 3rd Floor P.O. Box 4115 Rockford, IL 61110

CRUSADER CLINIC 1200 West State Street Rockford, IL 61102

DIRECT LOANS
P.O. Box 5609
Greenville, TX 75403-5609

FASHION BUG c/o Spirit of America National Bank P.O. Box 896 Milford, OH 45150

FINANCIAL CREDIT P.O. Box 2036 Warren, MI 48090

FIRST PREMIER BANK P.O. Box 5519 Sioux Falls, SD 57117-5519

FIVE AND DRIVE AUTO SALES, INC. 4840 North Second Street Loves Park, IL 61111

GRAND VICTORIA RIVERBOAT 250 South Grove Elgin, IL 60120

HARVARD COMMUNITY CREDIT UNION 1200 S. Division Street Harvard, IL 60033-8601

I.C. SYSTEMS
444 East Highway 96
P.O. Box 64378
St. Paul, MN 55764-0378

I.D.E.S. 850 E. Madison Street Springfield, IL 62701

ILLINOIS DEPARTMENT OF REVENUE Bankruptcy, Bulk Sales & Probate 100 W. Randolph St. L Chicago, IL 60601-3195

INTERNAL REVENUE SERVICE 230 S. Dearborn Mail Stop 5010 CHI Chicago, IL 60604

INTERNAL REVENUE SERVICE Centralized Insolvency Operation P.O. Box 21126 Philadelphia, PA 19114

LAKEISHA PHILLIPS c/o Illinois Dept. of Child Support 1114 Taylor Street Rockford, IL 61101

LASHONDA CHAMBERS 432 North Lenmington Avenue Chicago, IL 60644

MCI

Attention: APD 500 Technology Drive, Suite 820 Weldon Spring, MO 63304

MEDCLEAR INC. P.O. Box 8545 Philadelphia, PA 19101

MERCY HEALTH SYSTEM
Mercy Hospital
1000 Mineral Point Avenue
Janesville, WI 53547-5003

MUTUAL MANAGEMENT SERVICES 401 E. State St., 2nd Floor P.O. Box 4777 Rockford, IL 61110

NATIONAL CITY BANK P.O. Box 94982 Attn: Bankruptcy Department Cleveland, OH 44101

NCO FINANCIAL SYSTEMS 507 Prudential Road Horsham, PA 19044

NICOR GAS COMPANY P.O. Box 549 Aurora, IL 60507 PHYSICIANS IMMEDIATE CARE 4350 Morsay Drive Rockford, IL 61107

PORTFOLIO RECOVERY P.O. Box 12914 Norfolk, VA 23541

ROCKFORD HEALTH SYSTEMS Rockford Memorial Hospital 2400 N. Rockton Avenue Rockford, IL 61103

ROCKFORD HEALTH SYSTEMS Rockford Clinic 2300 N. Rockton Avenue Rockford, IL 61103

ROCKFORD MERCANTILE AGENCY 2502 S. Alpine Road Rockford, IL 61108

SPRINT Anderson Financial 404 Brock Drive Bloomington, IL 61701

ST. ANTHONY MEDICAL CENTER 5666 E. State Street Rockford, IL 61108

STATE OF IL., DEPT. OF EMP. SEC. Benefit Payment Control 401 S. State St., 4th Floor Chicago, IL 60605

U.S. DEPARTMENT OF EDUCATION Direct Loan Servicing Center P.O. Box 4609 Utica, NY 13504-4609

UIC CLINICS P.O. Box 4689 Rockford, IL 61110-4689 UNITED CREDIT SERVICE, INC. 15 North Lincoln Street P.O. Box 740 Elkhorn, WI 53121-0740